

AGREEMENT TO TRANSFER RECORDS TO THE NATIONAL ARCHIVES OF THE UNITED STATES		1. INTERIM CONTROL NO. <i>(NARA Use Only)</i>
<p style="text-align: center;">TERMS OF AGREEMENT</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <p>The records described below and on the attached _____ pages are deposited in the National Archives of the United States in accordance with 44 U.S.C. 2107. The transferring agency certifies that any restrictions on the use of these records are in conformance with the requirements of 5 U.S.C. 552.</p> <p>In accordance with 44 U.S.C. 2108, custody of these records becomes the responsibility of the Archivist of the United States at the time of transfer of the records. It is agreed that these records will be administered in accordance with the provisions of 44 U.S.C. Chapter 21, 36 CFR XII, 36 CFR Part 1256, and such other rules and regulations as may be prescribed by the Archivist of the United States (the Archivist).</p> </div> <div style="width: 48%;"> <p>Unless specified and justified below, no restrictions of the use of these records will be imposed other than the general and specific restrictions on the use of records in the National Archives of the United States that have been published in 36 CFR Part 1256 or in the <i>Guide to the National Archives of the United States</i>. The Archivist may destroy, donate, or otherwise dispose of any containers, duplicate copies, unused forms, blank stationery, nonarchival printed or processed material, or other non-record material in any manner authorized by law or regulation. Without further consent, the Archivist may destroy deteriorating or damaged documents after they have copied in a form that retains all of the information in the original document. The Archivist will use the General Records Schedule and any applicable records disposition schedule (SF 115) of the transferring agency to dispose of nonarchival materials contained in this deposit.</p> </div> </div>		
2A. AGENCY APPROVAL	2B. NARA APPROVAL	
Signature _____ Date _____	Signature _____ Date _____	
3A. NAME, TITLE, MAILING ADDRESS	3B. NAME, TITLE, MAILING ADDRESS	

RECORDS INFORMATION

4A. RECORDS SERIES TITLE	
4B. DATE SPAN OF SERIES <i>(Attach any additional description)</i>	
5A. AGENCY OR ESTABLISHMENT	9. PHYSICAL FORMS
5B. AGENCY MAJOR SUBDIVISION	<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <input type="checkbox"/> Paper Documents <input type="checkbox"/> Paper Publications <input type="checkbox"/> Microfilm/Microfiche <input type="checkbox"/> Electronic Records <input type="checkbox"/> Photographs </div> <div style="width: 48%;"> <input type="checkbox"/> Posters <input type="checkbox"/> Maps and Charts <input type="checkbox"/> Arch/Eng Drawings <input type="checkbox"/> Motion/Sound/Video <input type="checkbox"/> Other <i>(specify):</i> _____ </div> </div>
5C. AGENCY MINOR SUBDIVISION	10. VOLUME: Cu.Mtr Cu.Ft. CONTAINERS: Number: Type:
5D. UNIT THAT CREATED RECORDS	11. DATE RECORDS ELEGIBLE FOR TRANSFER TO THE ARCHIVES
5E. AGENCY PERSON WITH WHOM TO CONFER ABOUT RECORDS Name: _____ Telephone Number: _____	12. ARE RECORDS FULLY AVAILABLE FOR PUBLIC USE? <input type="checkbox"/> YES <i>(If no, attach limits on use and justification.)</i> <input type="checkbox"/> NO
6. DISPOSITION AUTHORITY	13. ARE RECORDS SUBJECT TO THE PRIVACY ACT? <input type="checkbox"/> YES <i>(If yes, cite Agency System Number and Federal Register volume and page number of most recent notice and attach a copy of this notice.)</i> <input type="checkbox"/> NO
7. IS SECURITY CLASSIFIED INFORMATION PRESENT? <input type="checkbox"/> YES <input type="checkbox"/> NO LEVEL: <input type="checkbox"/> Confidential <input type="checkbox"/> Secret <input type="checkbox"/> Top Secret SPECIAL MARKINGS: <input type="checkbox"/> RD/FRD <input type="checkbox"/> SCI <input type="checkbox"/> NATO Other <input type="checkbox"/> _____ INFORMATION STATUS: <input type="checkbox"/> Segregated <input type="checkbox"/> Declassified	14. ATTACHMENTS
8. CURRENT LOCATION OF RECORDS <input type="checkbox"/> Agency (Complete 8A only) <input type="checkbox"/> Federal Records Center (Complete 8B only)	<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <input type="checkbox"/> Agency Manual Excerpt <input type="checkbox"/> Additional Description <input type="checkbox"/> Privacy Act Notice <input type="checkbox"/> Other <i>(specify):</i> _____ </div> <div style="width: 48%;"> <input type="checkbox"/> Listing of Records Transferred <input type="checkbox"/> NA Form 14097 or Equivalent <input type="checkbox"/> Microform Inspection Report <input type="checkbox"/> SF(s) 135 </div> </div>
8A. ADDRESS	
8B. FRC ACCESSION NUMBER CONTAINER NUMBER(S) FRC LOCATION	

NARA PROVIDES

15. SHIPPING INSTRUCTIONS TO AGENCIES/REMARKS REGARDING DISPOSITION		RG
16. RECORDS ACCEPTED INTO THE NATIONAL ARCHIVES OF THE UNITED STATES Signature _____ Date _____	17. NATIONAL ARCHIVES ACCESSION NO.	